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PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0651-0033

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Alexandria, VA 22313-1450

Attorney Docket No.

First Named Inventor

John Bretscher

Original Patent Number

6,370,564 B2

Original Patent Issue Date
(Month/Day/Year)

April 9, 2002

Express Mail Label No.

EF 175837634 US

APPLICATION FOR REISSUE OF:

(Check applicable)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent
format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. 1.175) (PTO/SB/51 or 52)
6. ☒ Power of Attorney
7. ☒ Original U.S. Patent currently ☒ Yes ☐ No
(If Yes, check applicable box(es))
- ☒ Written Consent of all Assignees (PTO/SB/53)
- ☒ 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes
to the claims. See 37 CFR 1.173 (c).
11. ☐ Original Patent Grant
- ☐ Ribboned Original Patent Grant
- ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: First Certificate of Correction
Second Certificate of Correction


18. CORRESPONDENCE ADDRESS



Customer Number:

OR ☒ Correspondence address below

Name	Peter K. Trzyna				
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				Zip Code	60680
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NAME (Print/Type)	Peter K. Trzyna	Registration No. (Attorney/Agent)	32,601
Signature		Date	April 9, 2004

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		or	Other than a Small Entity	
				Rate	Fee		Rate	Fee
(A) 15	Total Claims (37 CFR 1.16(j))	(B) 113	**** 98 =	x \$ 9 =	\$882	or	x \$ 18 =	\$1,764
(C) 3	Independent claims (37 CFR 1.16(i))	(D) 20	* 17 =	x \$ 43 =	\$731		x \$ 86 =	\$1,462
Basic Fee (37 CFR					\$385			\$770
Total Filing Fee					\$1,998			\$3,996

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity			Other than a Small Entity	
					Rate	Fee		Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	x \$ 9 =	\$0		x \$ 18 =	\$0
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ 43 =	\$0		x \$ 86 =	\$0
Total Additional Fee						\$0	OR		\$0

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.☒ Please charge Deposit Account No. 50-0235 in the amount of _____
A duplicate copy of this sheet is☐ The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. _____
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

April 9, 2004

Date

32,601

Registration Number, if applicable

Signature of Applicant, Attorney or Agent of Record

Peter K. Trzyna

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

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Express Mail mailing label number: **ER371963385US**
I, Peter K. Trzyna (Reg. No. 32, 601), hereby certify that this
paper or fee is being deposited with the United States Postal
Service "Express Mail Post Office to Addressee" Service
under 37 CFR 1.10 on the date indicated below and is
addressed to MS: Assignment Division, Commissioner of Patents,
P.O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below:

PATENT

Paper No.

File:

Date:

April 1, 2004

Signed:

Peter K. Trzyna (Reg. No. 32,601)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors	:	See Enclosed
Serial No.	:	See Enclosed
Filed	:	See Enclosed
For	:	See Enclosed
Group Art Unit	:	See Enclosed
Examiner	:	See Enclosed

Honorable Commissioner of Patents
and Trademarks
Washington, D.C. 20231

TRANSMITTAL LETTER

S I R :

Transmitted herewith for filing in the above-identified patent application is
the following:

1. Assignment, executed March 29, 2004; and
2. Assignment Recordation Cover Sheet (in duplicate).

The Commissioner is authorized to charge any deficiency or to credit any
over payment to Deposit Account No. 50-0235.

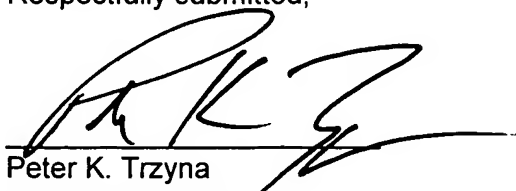
Please direct all correspondence to the undersigned at the address given

below.

Respectfully submitted,

Date: April 1, 2004

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